

UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.:	SC12730TC
	First Inventor:	George P. Hoekstra
	Title:	MULTISTAGE DYNAMIC DOMINO CIRCUIT WITH INTERNALLY GENERATED DELAY RESET CLOCK
	Express Mail Label No.:	EV 322114056 US

17497 U.S. PTO
10/7/18891

112103

APPLICATION ELEMENTS (see MPEP chapter 600 concerning utility patent application contents)	Mail Stop Patent Application ADDRESS TO: Commissioner for Patents P. O. Box 1450 Alexandria, VA 22313-1450
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1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status
See 37 CFR 1.27
3. ☒ Specification [Total Pages 18]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or computer program listing appendix
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 5]
5. Oath or Declaration [Total Sheets 3]
 - a. ☒ Newly executed (original or copy)
 - b. ☐ Copy from prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 18 completed)
 - i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)
6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. ☐ Nucleotide and/or Amino Acid Sequence (if applicable, all necessary)
 - a. ☐ Computer Readable Form (CFR)
 - b. ☐ Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-4 (2 copies); or
 - ii. ☐ Paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS	
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)	
11. <input type="checkbox"/> English Translation Document (if applicable)	
12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PT-1449 <input type="checkbox"/> Copies of IDS Citations	
13. <input type="checkbox"/> Preliminary Amendment	
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
15. <input type="checkbox"/> Certified Copy of Priority Document	
16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	
17. <input type="checkbox"/> Other: _____	

18. IF A CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in- Part (CIP) of prior application No. _____
 Prior application information: Examiner: _____ Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number	<u>23125</u>	or	<input type="checkbox"/> Correspondence address below		
Name					
Address					
City		State		Zip Code	
Country		Telephone		Fax	
Name	<u>Michael J. Balconi-Lamica</u>		Registration No.	<u>34,291</u>	
SIGNATURE	<u>Michael J. Balconi-Lamica</u>		Date	<u>11/21/03</u>	

SC12730TC

FEE TRANSMITTAL Patent fees are subject to annual revision <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Complete if Known	
		Application Number	
		Filing Date	Concurrently Herewith
		First Named Inventor	George P. Hoekstra
		Examiner Name	
		Group Art Unit	
TOTAL AMOUNT OF PAYMENT	(\$) 900.00	Attorney Docket No.	SC12730TC

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)																																																																																																																								
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account: Deposit Account Number 502117 Deposit Account Name Motorola, Inc. The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fees(s) indicated below, except for the filing fee to the above-identified deposit account.	3. ADDITIONAL FEES <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Large Entity</th> <th style="text-align: left;">Small Entity</th> <th></th> <th></th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1051</td> <td>130</td> <td>2051</td> <td>65</td> </tr> <tr> <td>1052</td> <td>50</td> <td>2052</td> <td>25</td> </tr> <tr> <td>1053</td> <td>130</td> <td>1053</td> <td>130</td> </tr> <tr> <td>1812</td> <td>2520</td> <td>1812</td> <td>2520</td> </tr> <tr> <td>1804</td> <td>920*</td> <td>1804</td> <td>920*</td> </tr> <tr> <td>1805</td> <td>1840*</td> <td>1805</td> <td>1840*</td> </tr> <tr> <td>1251</td> <td>110</td> <td>2251</td> <td>55</td> </tr> <tr> <td>1252</td> <td>420</td> <td>2252</td> <td>210</td> </tr> <tr> <td>1253</td> <td>950</td> <td>2253</td> <td>475</td> </tr> <tr> <td>1254</td> <td>1480</td> <td>2254</td> <td>740</td> </tr> <tr> <td>1255</td> <td>2010</td> <td>2255</td> <td>1005</td> </tr> <tr> <td>1401</td> <td>330</td> <td>2401</td> <td>165</td> </tr> <tr> <td>1402</td> <td>330</td> <td>2402</td> <td>165</td> </tr> <tr> <td>1403</td> <td>290</td> <td>2403</td> <td>145</td> </tr> <tr> <td>1451</td> <td>1510</td> <td>1451</td> <td>1510</td> </tr> <tr> <td>1452</td> <td>110</td> <td>2452</td> <td>55</td> </tr> <tr> <td>1453</td> <td>1330</td> <td>2453</td> <td>665</td> </tr> <tr> <td>1501</td> <td>1330</td> <td>2501</td> <td>665</td> </tr> <tr> <td>1502</td> <td>480</td> <td>2502</td> <td>240</td> </tr> <tr> <td>1503</td> <td>640</td> <td>2503</td> <td>320</td> </tr> <tr> <td>1460</td> <td>130</td> <td>1460</td> <td>130</td> </tr> <tr> <td>1807</td> <td>50</td> <td>1807</td> <td>50</td> </tr> <tr> <td>1806</td> <td>180</td> <td>1806</td> <td>180</td> </tr> <tr> <td>8021</td> <td>40</td> <td>8021</td> <td>40</td> </tr> <tr> <td>1809</td> <td>770</td> <td>2809</td> <td>385</td> </tr> <tr> <td>1810</td> <td>770</td> <td>2810</td> <td>385</td> </tr> <tr> <td>1801</td> <td>770</td> <td>2801</td> <td>385</td> </tr> <tr> <td>1802</td> <td>900</td> <td>1802</td> <td>900</td> </tr> </tbody> </table>	Large Entity	Small Entity			Fee Code	Fee (\$)	Fee Code	Fee (\$)	1051	130	2051	65	1052	50	2052	25	1053	130	1053	130	1812	2520	1812	2520	1804	920*	1804	920*	1805	1840*	1805	1840*	1251	110	2251	55	1252	420	2252	210	1253	950	2253	475	1254	1480	2254	740	1255	2010	2255	1005	1401	330	2401	165	1402	330	2402	165	1403	290	2403	145	1451	1510	1451	1510	1452	110	2452	55	1453	1330	2453	665	1501	1330	2501	665	1502	480	2502	240	1503	640	2503	320	1460	130	1460	130	1807	50	1807	50	1806	180	1806	180	8021	40	8021	40	1809	770	2809	385	1810	770	2810	385	1801	770	2801	385	1802	900	1802	900
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FEE CALCULATION					
1. BASIC FILING FEE					
Large Entity	Fee (\$)	Small Entity	Fee (\$)	Fee Description	Fee Paid
1001	770	2001	385	Utility filing fee	770
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	780	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					(\$)770.00
2. EXTRA CLAIM FEES					
Total Claims 25 - Previously Paid** 20 = Extra Claims 5 X Fee from below 18 = Fee Paid 90 Independent Claims 3 - 3 = 0 X 86 = 0 Multiple Dependent 290 = 0					
Large Entity	Fee (\$)	Small Entity	Fee (\$)	Fee Description	
1202	18	2202	9	Claims in excess of 20	
1201	84	2201	42	Independent claims in excess of 3	
1203	280	2203	140	Multiple dependent claim, if not paid	
1204	84	2204	42	* Reissue independent claims over original patent	
1205	18	2205	9	* Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					(\$)90.00
**or number previously paid, if greater; For Reissues, see above.					

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Michael J. Balconi-Lamica	Registration No.	34,291
Signature	<i>Michael J. Balconi-Lamica</i>	Telephone	512.996.6839
		Date	11/21/03

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